



**Arkansas Insurance Department
Accounting Division
1200 West Third Street
Little Rock AR 72201-1904
(501) 371-2612**

**INSTRUCTIONS FOR FILING FORM AID AC SLI-T,
ANNUAL CONTINUATION FILING FEE FOR
APPROVED FOREIGN SURPLUS LINES INSURERS**

Pursuant to ACA 23-61-401 & Department Rule & Regulation 57, all approved foreign surplus lines insurers are required to file form SLI-T along with their fee payment by March 1st each year. We do not honor the postmark, it must be in our office on or before March 1st or it will be considered late.

This filing must be sent to the attention of the Accounting Division. Do not send with any other correspondence or filings.

Pursuant to Department Rule & Regulation 57, all checks must be made payable to The State Insurance Department Trust Fund. No exceptions.

You are required to go to our website, www.arkansas.gov/insurance/, each year and print off the current form. The form changes each year. We do not accept software company forms or recreated forms of any kind.



ARKANSAS INSURANCE DEPARTMENT
ACCOUNTING DIVISION
1200 WEST THIRD STREET
LITTLE ROCK, AR 72201-1904
PHONE: (501) 371-2605
www.arkansas.gov/insurance/

2005 AID AC SLI-T
Due by March 1, 2006

ANNUAL CONTINUATION FILING FEE FOR APPROVED FOREIGN SURPLUS LINES INSURERS

STATE OF DOMICILE		NAIC COMPANY CODE (5 digit code)	
COMPANY NAME			
MAILING ADDRESS			
CONTACT PERSON		TITLE	
TELEPHONE NUMBER		EXT	FAX NUMBER
EMAIL ADDRESS			

FILE THE FOLLOWING ANNUAL FEES DUE THE STATE OF ARKANSAS PURSUANT TO
ACA 23-61-401 AND DEPARTMENT RULE AND REGULATION 57:

**CHECK MUST BE MADE PAYABLE TO THE STATE INSURANCE DEPARTMENT TRUST FUND.
ATTACH CHECK TO THIS FORM AND SEND TO THE ACCOUNTING DIVISION. DO NOT SEND
WITH ANY OTHER CORRESPONDENCE, ANNUAL STATEMENT OR FILING.**

ANNUAL STATEMENT FILING FEE	\$ 50.00
RULE 57 ANNUAL CONTINUATION FEE	<u>500.00</u>
TOTAL FEES DUE	\$550.00

FILED THIS _____ DAY OF _____, 20_____.

SIGNED BY: _____ (original wet signature of Officer or Director)

_____ (PRINTED NAME)

_____ (TITLE)